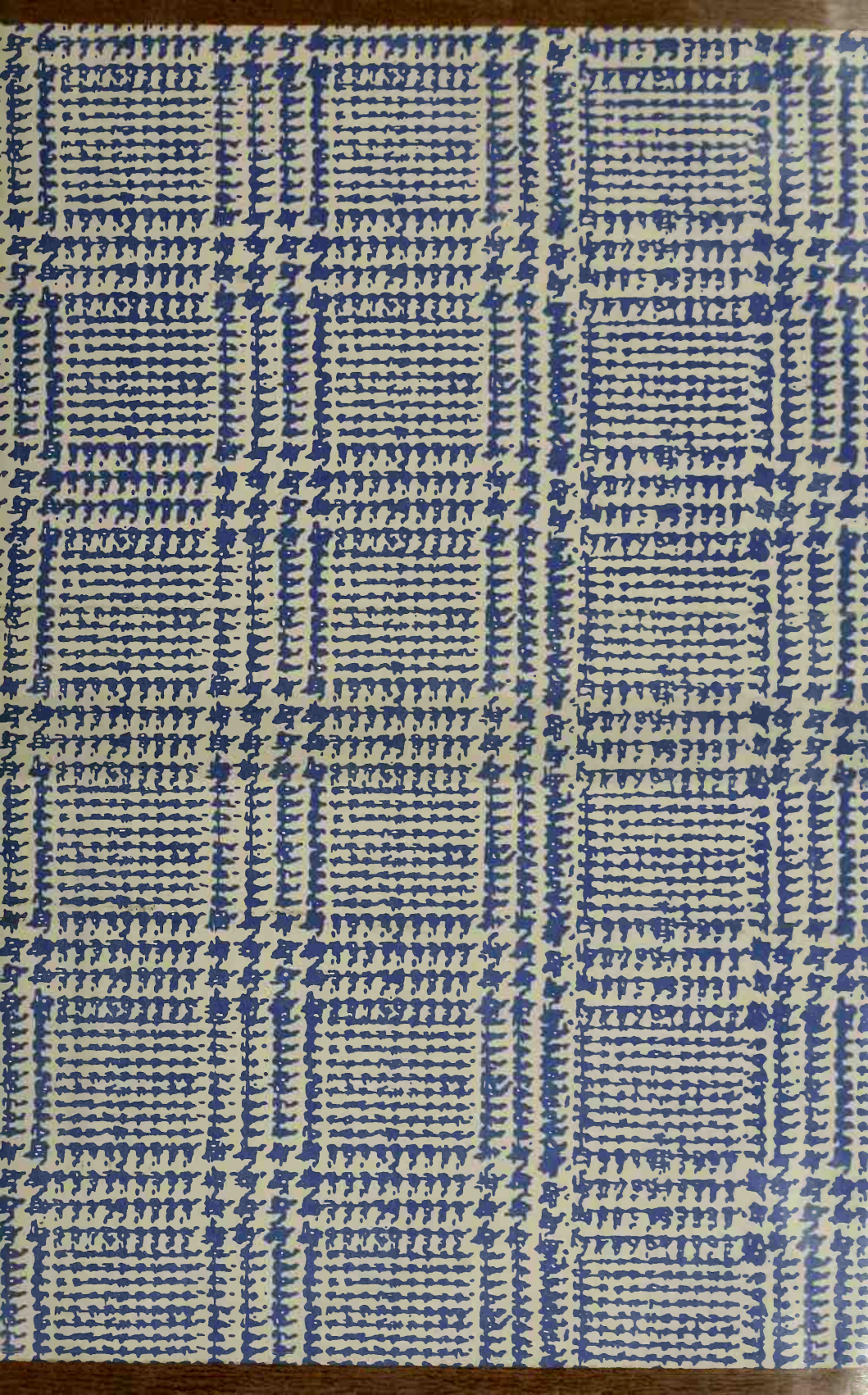

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THE NEWS LETTER

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Dr. Charles W. Eliot, President Emeritus of Harvard, has become a member of the Board of Directors of the National Committee for the Prevention of Blindness.

Since the December issue of The News Letter three friends of the Committee have crossed the invisible threshold.

December 18th, Mrs. Ira Couch Wood, Director of the Elizabeth McCormick Memorial Foundation, Chicago, died after an illness of several weeks. Mrs. Wood was interested in everything that pertained to better health, particularly in the training of nurses. During Children's Year she was Chairman of the Child Welfare Department of the Illinois Division of the Council of National Defense. At the time of her death she was National Chairman of Child Welfare of the General Federation of Women's Clubs.

On Christmas morning, Miss Georgina Schuyler passed quietly away. She was intensely interested in the work of the Committee for the Prevention of Blindness ever since its establishment in 1908 by her sister, Miss Louisa Lee Schuyler. Her life was filled with the joy of others. No task was too small for her hand to do, or too great for her heart to understand and sympathize with. To the inspiration of the life of this quiet, lovable, generous woman, the Committee renders grateful tribute.

January 14, 1924, there died in Pekin Dr. L. Emmett Holt, world famous specialist in children's diseases and author of well-known books on child care. He had been appointed by the Rockefeller Foundation as visiting professor of pediatrics to the Pekin Union Medical College.

DEFECTIVE VISION IN SCHOOL CHILDREN

One child out of every ten in the public schools of the United States is handicapped by defective vision. This conclusion is

based on an intensive study made by the National Committee for the Prevention of Blindness of the findings of examination of the eyes of 1,194,923 children during the past year in New York State, Connecticut and Rhode Island. Since these examinations covered rural districts as well as cities, it is assumed that the conditions found in these states are characteristic of the country at large.

Of the number reported above, 112,479 children, or 9.4%, were found to have defective vision. Examinations were made by doctors, nurses and teachers.

An examination of the amount of defective vision found by various examiners in 31 cities in other states is interesting. Seven cities where examinations are given by physicians show only a total of 8.2% defects in an examination of 47,709 children. Where nurses are the examiners, the percentage is increased to 11. Nurses found 5,980 children out of 51,709 who had defective sight in ten cities. In five cities where examinations are made by physicians and nurses, the percentage of pupils with defective vision is found to be 4.4%, 1300 children out of 29,590 examined being found with defective sight. Where the examination is made by teachers alone in eight of the thirty-one cities, 10% were judged to have defective vision—4,228 out of 41,934.

The fact that one child out of every ten in the schools of rural districts as well as of cities has defective vision is a condition serious enough to warrant the utmost efforts toward correction and prevention. It is gratifying, however, to learn that school systems are each year giving greater attention to sight saving, not only by establishing conservation of vision classes for those children whose eye condition makes it impossible for them to be educated in the regular grade, but what is of far greater importance, bettering school conditions so that children without eye handicap may be prevented from acquiring one in the process of education.

LAYING A STRONG FOUNDATION

Santa Claus was indirectly responsible for the total or partial blinding of scores of children during and following Christmas week, according to statistics obtained by the National Committee for the Prevention of Blindness in its national survey of accidents to the eyes. Since January 1st, there have been received reports

of thirty-two children shot in the eye by air rifles and twenty-six whose eyes were injured by fireworks during the holiday celebration. Practically all the injuries resulting from fireworks were reported from southern states.

The census of eye accidents which was started last August has brought to light each month a few cases of serious injuries to the eyes of children resulting from the use of air rifles. The extraordinary number of such cases reported during the first three weeks of January is attributed by the National Committee to the use of air rifles received as Christmas presents, most of these accidents having occurred within a few days after Christmas. Thirty-one of the children whose eyes were injured by air rifles were boys, and one little girl was shot by her brother.

Sky rockets, Roman candles, torpedoes, "dynamite caps" and "cannon crackers" used by children in Virginia, Kentucky, Tennessee, Georgia, South Carolina, North Carolina, Alabama, Arkansas, Illinois, Texas and Indiana caused serious injury to the eyes of more than a score of boys and girls, necessitating the removal of an eye in many cases and resulting in total blindness in other cases.

The idea has often been expressed that the playthings of a nation's children indicate in some measure its place in civilization. When America substitutes playthings symbolic of peace for those symbolic of war, not only will eyes and fingers and feet be saved, but a true foundation laid for a civilization devoted to the development of the arts of peace. How about getting after Santa Claus in time to change his tactics before next Christmas?

NEWS OF THE JUNIOR COMMITTEE

The Junior Committee in its talks to children calls attention to the loss of sight resulting from the use of dangerous toys, and stresses the importance of care in play.

Interest of girls and boys in good eyesight is witnessed by a growing membership of Juniors. The co-operation of volunteers is sought in extending this interest and in helping to promote sight conservation among children. Baltimore and Philadelphia, through their Junior League Committees, are giving valuable aid, and seven Junior Leagues in New York State are considering the inclusion of such work in their local programs.

PROPORTION OF PUPILS BLIND FROM OPHTHALMIA NEONATORUM IN FORTY-EIGHT SCHOOLS AND CLASSES FOR THE BLIND—1922–23

	Total Pupils 1922–23	Total Pupils Blind from O. N.	Per Cent.	New Admissions 1922–23	New Pupils Blind from O. N.	Per Cent.
Arkansas School for the Blind	99	21	21.2	15	2	13.3
California School for Deaf and Blind	98	9	9.2	16	1	6.3
Colorado School for Deaf and Blind	65	11	16.9	13	1	7.7
Connecticut School for the Blind	61	10	16.4	8	1	12.5
Illinois School for the Blind	*233	54	23.2	40	4	10.0
Indiana School for the Blind	140	30	21.4	28	3	10.7
Iowa College for the Blind	114	14	12.3	23	6	26.1
Kansas School for the Blind	112	22	19.6	16	5	31.3
Kentucky School for the Blind	100	35	35.0	10	5	50.0
Louisiana State School for the Blind	72	1	1.4	22	0	0
Maryland School for the Blind	106	20	18.9	15	1	6.7
Michigan School for the Blind	177	4	2.3	32	0	0
Minnesota School for the Blind	85	21	24.7	16	4	25.0
Mississippi Institute for the Blind	81	14	17.3	7	1	14.3
Missouri School for the Blind	124	25	20.2	36	6	16.7
New Mexico Institute for the Blind	85	27	31.8	22	5	22.7
New York Institute for Education of the Blind	111	20	18.0	25	4	16.0
New York State School for the Blind	182	35	19.2	27	4	14.8
North Carolina Institution for the Deaf, Dumb and Blind	221	19	8.6	44	2	4.5
North Dakota School for the Blind	36	5	13.9	5	1	20.0
Ohio State School for the Blind	278	69	24.8	33	6	18.2
Oregon State School for the Blind	45	1	2.2	6	0	0
Pennsylvania Institution for Instruction of the Blind	253	67	26.5	45	9	20.0
Perkins Institute and Massachusetts School for the Blind	302	57	18.9	43	4	9.3
South Dakota School for the Blind	35	3	8.6	3	0	0

Tennessee School for the Blind	**164	28	17.1	25	2	8.0
Texas Institute for Deaf, Dumb and Blind Colored Youth	77	32	41.6	..	..	..
Texas School for the Blind	244	39	16.0	23	4	17.4
Utah School for the Deaf and Blind	34	5	14.7	5	0	0
Virginia School for the Deaf and Blind	73	16	21.9	8	1	12.5
Washington State School for the Blind	69	7	10.1	7	0	0
Western Pennsylvania Institution for the Blind	145	45	31.0	14	1	7.1
Wisconsin School for the Blind	130	43	33.1	23	7	30.4
	4,151	809	19.5	655	90	13.7
Pupils in Classes for the Blind in Public School Systems:						
California—Los Angeles	20	1	5.0	0	0	0
Illinois—Chicago	50	7	14.0	14	1	7.1
Michigan—Detroit	17	9	52.9	3	1	33.3
Minnesota—Duluth	23	1	4.3	12	1	8.3
Minneapolis	16	6	37.5	5	2	40.0
New Jersey—Newark	21	4	19.0	1	0	0
Paterson	8	0	0	8	0	0
New York—Buffalo	10	0	0	10	0	0
New York	108	17	15.7	17	2	11.8
Ohio—Cincinnati	14	5	35.7	2	0	0
Cleveland	54	16	29.6	8	0	0
Toledo	8	2	25.0	0	0	0
Youngstown	6	0	0	1	0	0
Wisconsin—Milwaukee	16	5	31.3	1	0	0
Racine	2	0	0	1	0	0
	373	73	19.6	83	7	8.4
GRAND TOTAL	4,524	882	19.5	738	97	13.1

*Ten of these not examined. **White pupils.

The table of statistics on pages 4 and 5 of causes of blindness in schools and classes for the blind refers to the school year of 1922–23. The Committee cannot be responsible for the accuracy of these, since many superintendents of such schools still report that the only records are those of parents or guardians, who all too often are ignorant of the actual cause. Gradually examinations are being made of blind pupils by oculists; the extension of this plan will not only lead to more nearly accurate statistics, but, what is of the greatest possible importance, to the finding of individuals blind from causes that can be eliminated. Many children thought to be blind for life have been discovered to be suffering from operable cataract, and have been given useful vision by the skilled hand of the eye surgeon; others practically blind from interstitial keratitis have had their sight greatly benefited by proper blood treatment; while phlyctenular keratitis cases have often received nearly normal vision through treatment for tuberculosis. THE NEWS LETTER urges examination by a skilled oculist for every child in every school for the blind.

CALIFORNIA

The report of the Industrial Accident Commission for the State of California gives a total of 65,836 eye injuries during the years 1914–1921. Of this number 1772 were permanent, with 25 cases of total blindness. The Commission cites these figures in an effort to bring forcefully to the attention of the public the fact that the use of goggles and protective devices for the eyes in hazardous occupations will materially decrease the number of such accidents.

The report commends the constructive work recently undertaken by the California Society for the Blind.

ILLINOIS

So much publicity has been given to the fact that out of 56,724 births reported in Chicago in 1922 not a single case of blindness occurred, that the Board of Health probably feared a relaxing of vigilance. The *Weekly Bulletin* for December 15, 1923, is therefore devoted to a warning to physicians and midwives to fulfill the law requiring the immediate use of a prophylactic in the eyes of the new-born, and the reporting of every case of sore eyes in infants within six hours of the first appearance of symptoms. It is not

sufficient to prevent blindness; the elimination of ophthalmia neonatorum (babies' sore eyes) is the goal.

KENTUCKY

Through the efforts of Miss Linda Neville, the indefatigable friend of every child in Kentucky, an important change has been made in the "Instructions to School Census Takers." These contained a paragraph directing that the name of every blind child should be omitted from the school census. Not only has this paragraph been deleted, but hereafter, opposite the name of every such child, shall be added the word *blind;* hence the biennial census which is to be made in the state this spring will include blind children under the educational law and will also furnish a list of all blind children of school age.

Miss Neville's heart and hand go out to every blind child, but her greatest efforts have been devoted to preventing the tragedy of blindness.

Through her action a bill has been introduced into the legislature authorizing the establishment of sight-saving classes in the public school system.

MARYLAND

Baltimore adds its name to the list of cities reporting that not a single case of blindness resulted from ophthalmia neonatorum during the year. Two hundred and two cases of the disease developed; prompt action in reporting and treating saved the eyes so afflicted.

NEW YORK

The December issue of THE NEWS LETTER quoted the report of Dr. William A. Howe, Medical Inspector of Schools, summing up eye conditions for the school year ending January 31, 1923. It should be noted that this report does not include the cities of Buffalo, New York and Rochester, since these do not come under the state medical inspection law.

The report of the Supervising Oculist of the New York City school eye clinics is as follows:

Number of new cases	24,672
" " refractions	42,449
" " treatments for contagious and other conditions	55,381
Prescriptions for glasses	11,233
Medical prescriptions	71,874
Electrical treatments for corneal scars	2,602

A bill has been introduced in the legislature to amend the education law in relation to the appointment of a state specialist for eyes and ears to read as follows:

"577–a. State Specialist for eyes and ears. The commissioner of education shall also appoint a specialist for eyes and ears in the bureau of medical inspection who shall receive an annual salary, to be fixed by the commissioner within the amount of moneys appropriated therefor. He shall assist the state medical inspector in making eye and ear tests of the pupils of the public schools as required by this article. He shall also assist in providing for students in the state normal schools, city training schools and training classes instruction and practice in the best methods of testing the sight and hearing of children and shall perform such other duties as the commissioner of education may prescribe.

"This act shall take effect immediately."

PENNSYLVANIA

The report of the Department of Labor and Industry for the first ten months of 1923 shows 516 eyes lost and a compensation paid of $791,352. The complete list of eyes lost since the inception of the compensation act, January 1, 1916, numbers 4,556; with a compensation award of $6,000,922.

The loss of eyes is far in excess of the loss of any other part of the body, hands coming next with a loss of 1,950; feet, 1,026; legs, 774, and arms, 584. Likewise is the compensation award greatest, the compensation for the loss of hands following with $3,362,955 awarded; feet, $1,586,779; legs, $1,574,188; arms, $1,218,416.

Eye accidents reported show an increase for the first eight months of the year, a decided drop to 30 in September and a slight increase to 36 in October.

The report states that the loss of eyes was due to injury or infection.

"In the majority of cases the eye-loss is caused by foreign particles flying into the eye on account of insufficient protection either by means of suitable screens or by failure to wear goggles. The state requirements provide that when employes are engaged in any occupation where there is danger of injury to the eye from flying particles, goggles shall be provided by the employer and the employe shall be obliged to wear them.

"If the enforcement of the law compelling the wearing of goggles were only to conserve man-power and cut down labor turnover, it would be

well worth while, but when it is realized that it is to save the eyes, it is doubly worth while. In occupations hazardous to sight, the only possible protection to the eyes is the wearing of goggles.

"In the ten years' experience of this Department in accident prevention there is not a single example of loss of sight from flying particles of material when goggles were worn, even if the goggles were broken when struck by flying particles."

VIRGINIA

The Virginia Commission for the Blind recently appointed Miss Orville Street to take charge of its preventive department. She is exceedingly well trained for this undertaking. She is a graduate nurse; has taken a course of instruction at the Richmond School of Social Service, and has specialized for three years in an eye, nose and throat hospital. At the request of the Commission, the National Committee for the Prevention of Blindness sent its Secretary, Mrs. Winifred Hathaway, to assist in initiating a prevention program. While in the state Mrs. Hathaway gave a series of lectures at the State Normal School, Fredericksburg; addressed the students of William and Mary College and gave numerous demonstration talks to elementary, junior high and high school pupils in Fredericksburg, Richmond and Williamsburg.

NEWS OF MAGAZINES, POSTERS AND ARTICLES OF INTEREST

Many readers of THE NEWS LETTER have indicated that its brief synopses of articles are of value; some have requested fuller information, which the editor is always glad to give.

The Committee cannot undertake to supply copies of the articles mentioned; the majority of magazines containing them are to be found in any good public library; traveling libraries strive to meet special needs in rural districts. Your library will doubtless be glad to carry what you want, if resources permit.

THE MONTHLY DIGEST, issued by the National Health Council, 370 Seventh Avenue, New York, has doubled the number of pages and has discarded the glossy paper on which it formerly made its appearance. It is one thing to present material in an interesting manner, but quite another to stimulate interest through eye comfort. The *Digest* has initiated a course of action that will attain both desired results.

THE CHILD HEALTH MAGAZINE proves, on nearer acquaintance, to be our old inspiring friend, "Mother and Child," grown to full size and arrayed in a spander new gown of blue with charming silhouettes in white. The American Child Health Association, the organization responsible for it, is indeed to be congratulated upon the makeup. Even very tired

eyes will be able to read the big, clear print without effort, and eyes not a whit tired will be saved from becoming so by the excellent lettering and spacing. Great care is shown in the selection of paper; a light buff is used in dull finish of a quality that is advantageous for reproducing cuts.

"BOOKS IN BIG PRINT FOR CHILDREN." May G. Quigley, Chief Children's Department, Grand Rapids Public Library. *School Life*, December, 1923. This article stresses the plea of so many children, "Please give me a book with big letters," and the equally urgent appeal—"I can't read it; the print is too small." It explains how the Grand Rapids Public Library is trying to meet these conditions and expresses the hope that now since the general movement for protecting the sight is extending to publishers as well as to readers, the days of the small type book are numbered.

"$10 Reward!" This is the title of poster No. 1347 recently issued by the National Safety Council, Chicago, Ill. "Three months ago, 'Red' Hughes, an assistant general foreman at the Pullman Company shops offered a ten dollar bill to the first man who saw him without his goggles on during working hours.

"Red still has his 10 bucks!"

"Red" looks mighty happy to have two good eyes for service and pleasure as well as his ten bucks!

"THE COMMON WELFARE." *Survey*, January 15, 1924. "How far have we gone on the road to health? One leader answers that we have reached perhaps 5 per cent of the expectant mothers, a scant 50 per cent of the babies, perhaps one per cent of the children between two and five, most of the school children, and at a guess 5 per cent of the adults. Much of the enemy's country remains to be conquered, but the magnitude of that task shrinks when we consider some of the salients where victory already is within reach. There was once a time when a quarter of all new-born babies developed 'sore eyes,' ophthalmia neonatorum. Many of these babies were blinded for life. They formed a third of the whole burden of disability born by nurseries, schools and homes for the blind as well as by their own families. A few days ago the Chicago Board of Health reported that to the best of its knowledge not one of the 56,724 children born in that city in 1922 has lost his sight. Cleveland believes that it has no blind child of less than three years. Massachusetts has not recorded an instance of the infection for more than five years. Grand Rapids has had a clean slate for so long that there is no case of blindness among its school children. Within the lifetime of the pioneers who worked for the first legislation—the New York state law of 1890 which required notification of the condition—an unending campaign of education, lawmaking, and enforcement has demonstrated once more the truth of the credo that public health is purchasable—whenever we care enough to work to get it."

"PREVENTING EYE WASTAGE IN INDUSTRY." Dr. L. M. Francis, Buffalo, N. Y. *National Safety News*, December, 1923. Takes up the human and economic aspects of eye accidents from the standpoint of the employer and the employe. Emphasizes having the man fit for the job through preliminary visual tests—first to be sure that the employe has enough

vision to undertake the job, and second because of the question of compensation for possible injury. Touches upon the subject of eye diseases and of immediate attention to eye injuries. "It is not the major injury that does the damage; it is not the fellow who gets whacked in the eye with a crowbar and who has to have his eye removed—it is the little injury and particularly it is the foreign body in the cornea that causes the most trouble."

"Squint and the Child Mind." C. F. Harford, M.D. *The Child* (London), January, 1924. A study of the relationship of squinting to left-handedness. A presentation of the findings of an intensive study made of seventy cases, taking into consideration not only the individual patient but his ancestors and collaterals.

"The Standardization of School Medical Inspection." Carl E. Buck, Dr. P. H. *American Journal of Public Health*, December, 1923. As the title suggests, Dr. Buck sets forth the great need of standardization of school medical inspection. "The findings of medical inspectors in different cities as recently as 1921 show astonishing variations. For example, tonsillar defects vary from 5.0 per cent in St. Louis to 39 per cent in Toronto. In St. Louis .1 per cent of those examined are reported as having enlarged cervical glands, in San Francisco 34 per cent. Mouth breathing varies from .4 per cent in Minneapolis to 24 per cent in Toronto. Defective vision varies from 3 per cent in Atlanta to 23 per cent in Milwaukee."

The author concedes that naturally there may be variations in children of different localities, but that these cannot be so great as the above figures would seem to indicate; the object that he has in view is to make it possible for the country as a whole to use intelligently and confidently the information gathered by its various communities. This presupposes such standardization of figures and methods as to make them comparable.

"While it would seem unfeasible to attempt a standardization of all the various phases of school inspection, there are at least four points which could be applied to any size or type of community: (1) standard preparation for position of school medical inspector, (2) standard and accurate but simple definitions of conditions to be looked for in the examination, (3) standard scale for grading physical conditions among school children, (4) standard method of recording corrections of physical defects."

"Medical Inspection of Schools and Correction of Defects." C. V. Akin, Surgeon, U. S. Public Health Service. *The Nation's Health*, December, 1923. The author sums up the purposes of health work thus: (1) To determine the physical and mental status of children of school age to the end that sick and defective or otherwise necessitous children may receive appropriate care and handling. The provision of such care to the needy unquestionably reacts with benefit to the remainder of a school population; teachers and pupils alike. (2) To conserve the physical resources and promote the health of the entire school group as the most effective means; to: (a) build up the resistance of the group to infectious processes; (b) elevate the standard of school performance; and (c) provide the several members of the school popula-

tion with the bodily stamina needed to meet successfully the demands of school work."

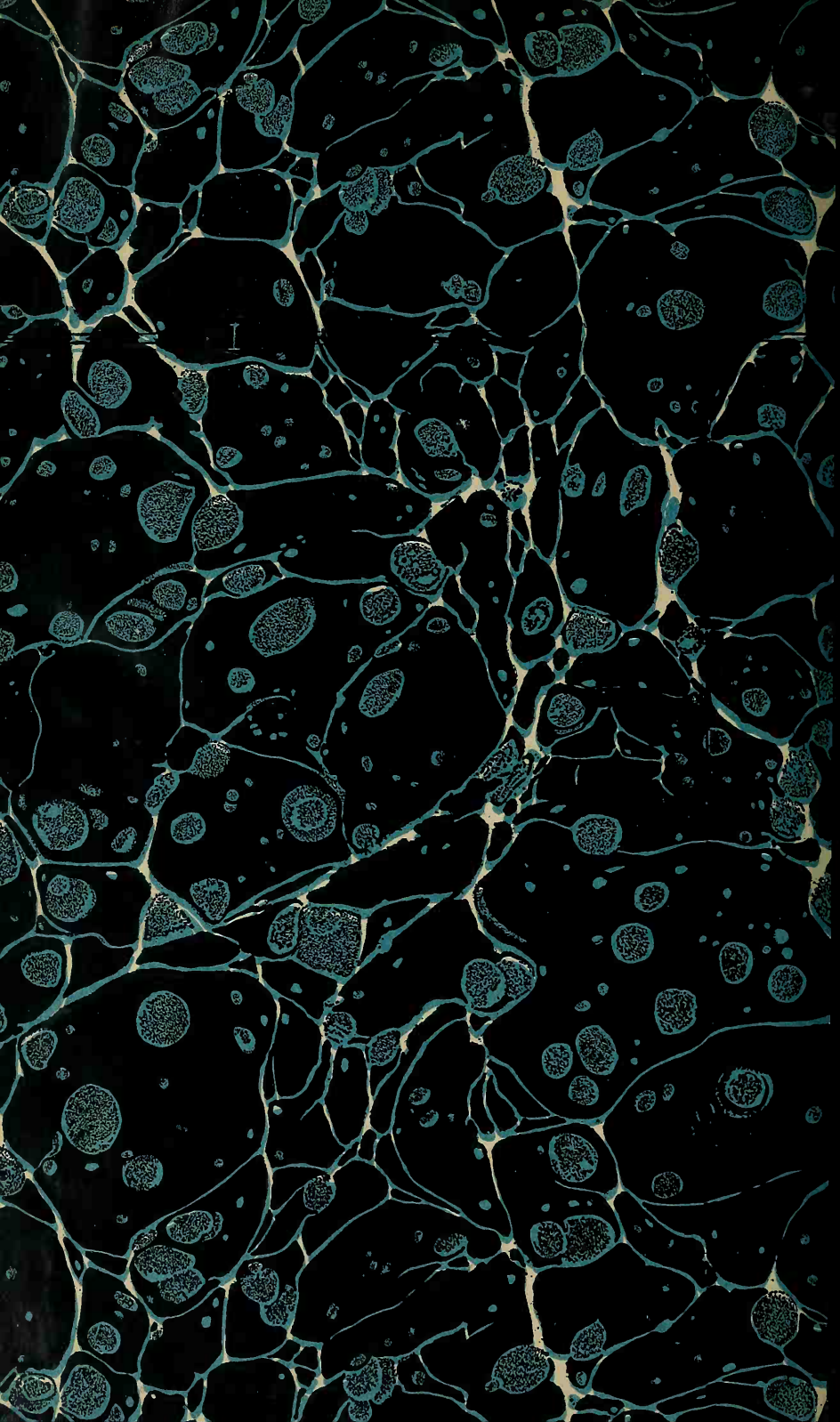
Speaking of the responsibilities of the teacher he says: "The first, relatively coarse, screen through which children should be passed is that represented by the grade-teacher with whom they are thrown in daily contact. Sympathetic, more than ordinarily intelligent, and when interested, highly observant, this teacher is usually quick to sense unfavorable changes in her charges. She has the opportunity that no medical inspector ever has for a series of comparative observations on the group under her supervision. It is not suggested that we make physicians of our school teachers. In using the teacher we are reversing the procedure a physician would follow. In this program of preliminary screening she would sift out the obviously normal specimens, all others automatically falling into the examination group.

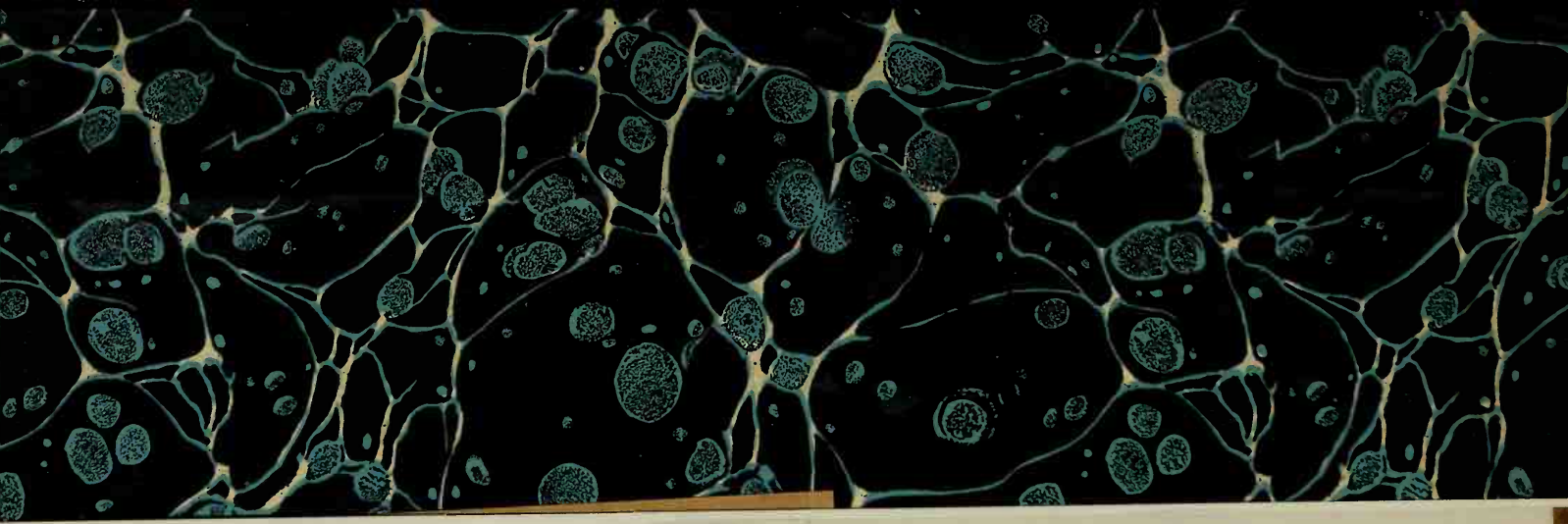
"With a minimum training the average teacher can test vision and hearing. Not for the purpose of diagnosing eye and ear pathologies but merely to set aside children who see and hear normally thereby diminishing the total amount of work to be done by the inspector or nurse. By observation alone the teacher can single out the genuinely healthy children in her room and it is highly probable that such observation coupled with a careful estimation of the child's progress in school will spot the children for whom assistance is urgently required. If other signs are needed there are the attendance and age-grade records, both of which have certain value as indicators of subnormality."

"LIGHTING LEGISLATION," Information compiled by G. H. Stickney, Edison Lamp Works, Harrison, New Jersey. This valuable compilation comprises data on the following: need of regulations, danger of unwise regulations, the recent movement, state and other codes, industrial lighting codes, school lighting codes, motor vehicle headlight regulations, motor vehicle tail-light regulations, future legislation, bibliography.

"ESTIMATING VISUAL IMPAIRMENT." Editorial, *The Nation's Health*, January 15, 1924. This article deals with the question of standardization in estimating compensation awards. Evaluating eyes, according to the editor, is the problem most needing scientific investigation. Laws regarding total loss are fairly uniform, "but when we approach the matter of compensation for partial loss of vision we find that chaos is supreme." The author takes up the various aspects that should be considered: visual acuity, reduction of the field of vision, the loss of binocular single vision, age and occupation of the injured, etc.

"When experts disagree what can officials entrusted with the making and enforcement of compensation laws do in order that justice may prevail? It is evident that they can do little of themselves; the subject is too technical and complex. Should ophthalmologists, however, come to an agreement in regard to the proper method to be used in calculating partial loss of vision there is little reason to suppose that the states would not rapidly fall in line, in giving legal sanction to one standard method, and that just and equitable compensation would be assured for the impairment of that which man has long considered one of his most precious possessions."





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